

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	SF		4-25-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TH	1124	10-4-01 10/18/01
RESPONSE FORMALITY REVIEW	TH	1113	12-31-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	04-01-01
2	04-01-01
3	04-01-01
4	04-01-01
5	04-01-01
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50	04-01-01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

10809
 12/31/01
 20876
 10/18/01